PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09 733935

		CLAIMS AS	SFILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE :			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			22				F	RATE	FEE		RATE	FEE	
FOR.			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			೨ಎ minus 20=		<u>* 2</u>		>	(\$ 9=	_	OR	X\$18=	36	
INDEPENDENT CLAIMS			G minus 3 =		3		>	(40=		OR	X80=	240	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+	135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in column 2		T	OTAL		OR	TOTAL	986	
	C	Laims as a	MENDED	ided - Part II							OTHER THAN		
	0	(Column 1)	(Colun			(Column 3)	S	WALL E		OR	SWALLE		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=		
AME	Independent	*	Minus ***		T CL AIM	=	>	(40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								135=		OR	+270=		
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	\	(40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=			+270=		
								TOTAL		OR	TOTAL		
								IT. FEE	<u> </u>	OR	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	,	NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=		
A RVE	Independent	*	Minus	***		=	×	(40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM			105			675		
	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2 write	e "O" in co	lumn 3	+	135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													